

Bureau of Licensure and Certification

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS187AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/04/2008
NAME OF PROVIDER OR SUPPLIER FOREDAWN GUEST HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 7711 FOREDAWN DRIVE LAS VEGAS, NV 89123		
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Y 000	<p>Initial Comments</p> <p>This Statement of Deficiencies was generated as a result of the annual state licensure survey conducted at your facility on December 4, 2008.</p> <p>The survey was conducted using Nevada Administrative Code (NAC) 449, Residential Facility for Groups Regulations, adopted by the Nevada State Board of Health on July 14, 2006.</p> <p>The facility was licensed for 10 beds.</p> <p>The facility had the following category of classified beds: Category 1 - 10 beds.</p> <p>The facility had the following endorsements:</p> <p>Residential facility for elderly or disabled persons and/or for persons with mental illnesses.</p> <p>The census at the time of the survey was 7. Seven current resident files and 2 closed resident files were reviewed, and 2 employee files were reviewed.</p> <p>There were no complaints investigated during the survey.</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>The following regulatory deficiencies were identified:</p>	Y 000	<p><i>Acceptable PO C</i> <i>W. Pene, RN, HF III</i> <i>12/31/08</i></p>	
Y 105	449.200(1)(f) Personnel File - Background Check	Y 105		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Fely Vilasio - Owner

TITLE

(X6) DATE

12-23-08

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DEC 23 2008

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Y 105	Continued From page 1 NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review on 12/4/08 the facility failed to ensure that 2 of 2 employees met the background check requirements for criminal history (#1, #2). Findings include: Employee #1 was hired on 5/15/96. The personnel file lacked documented evidence of a signed statement indicating the employee had not been convicted of any crimes listed in NRS 449.188. Employee #2 was hired on 7/7/02. The personnel file lacked documented evidence of a signed statement indicating the employee had not been convicted of any crimes listed in NRS 449.188. Severity: 2 Scope: 3	Y 105	A The facility will ensure that all personnel file will be current, complete in all documentation as required. B All personnel file will have the required information at all time will develop a check list to be completed every 6 months to ensure that all personnel file documentation will always current and complete. Employee #1 documented evidence of a signed statement indicating the employee had not been convicted of any crimes listed in NRS 449.188 done signed and in file <i>cont at the back</i>	
Y 173	449.209(3) Health and Sanitation-Inside garbage NAC 449.209 3. Containers used to store garbage in the kitchen and laundry room of the facility must be covered with a lid unless the containers are kept in an enclosed cupboard that is clean and prevents infestation by rodents or insects. Containers used to store garbage in bedrooms	Y 173	A The facility will ensure that garbage container in the kitchen will always keep covered and clean as required. <i>cont to next page</i>	

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If continuation sheet 2 of 9

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LAS VEGAS, NEVADA

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Y 173	Continued From page 2 and bathrooms are not required to be covered unless they are used for food, bodily waste or medical waste. This Regulation is not met as evidenced by: Based on observation on the facility failed to provide covered garbage containers in the kitchen. Findings include: On 12/4/08 at 1:40 PM, the garbage container in the kitchen was not kept in an enclosed cupboard and did not have a lid. Severity: 2 Scope: 3	Y 173 B	The facility will maintained a clean covered garbage container in the kitchen a new garbage container with lid covered was provided. will keep clean and covered always. The administrator or the designated person will monitor the compliance. C 12-7-08	
Y 177	449.209(4)(d) Health and Sanitation-Dirt, Garbage, Refuse NAC 449.209 4. To the extent practicable, the premises of the facility must be kept free from: (d) Accumulations of dirt, garbage and other refuse. This Regulation is not met as evidenced by: Based on observation the facility failed to ensure the premises were free of accumulations of garbage and other refuse. Findings include:	Y 177 A	The facility will ensure that the premises will be free of garbage accumulated and other refuse to keep the back yard always clean as required. B The facility will removed all garbage accumulated and other refuse, to keep the premises always clean in the back yard. cont to next page	

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If continuation sheet 3 of 9

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Y 177	Continued From page 3 On 12/4/08 at 1:45 PM observation of the north side yard of the facility revealed a shed fabricated with old doors and chicken wire that was dilapidated and cluttered. Next to the shed and inside the shed were various discarded items including plastic containers, a broken wheelbarrow, tires, cardboard and furniture. Severity: 2 Scope: 3	Y 177	The administrator or the designated person will monitor the compliance. C 12-6-08	
Y 250	449.217(1) Kitchens-Equipment works; Clean and Sanitary NAC 449.217 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition. This Regulation is not met as evidenced by: Based on observation, the facility failed to ensure the kitchen equipment was clean. Findings include: On 12/4/08 at 1:40 PM, observation of the kitchen revealed the oven and microwave had accumulations of grease on the exterior. This is a repeat deficiency from the 8/9/07 survey. Severity: 2 Scope: 3	Y 250	A The facility will ensure that kitchen area will always keep clean. All kitchen equipment must be in good working condition and all keep clean as required. B All kitchen equipment will always keep clean and all in working condition. cleaning will always done after cooking or after using the area to make it sure every things keep clean always microwave - clean and will always keep clean every after used. stove build up grease clean and will always keep clean and after used, cont at the back	

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Y 434	<p>449.229(3) Emergency Drills</p> <p>NAC 449.229 3. A drill for evacuation must be performed monthly on an irregular schedule, and a written record of each drill must be kept on file at the facility for not less than 12 months after the drill.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview, the facility failed to ensure evacuation drills were conducted monthly, recorded and kept on file at the facility.</p> <p>Findings include:</p> <p>A review of the fire drill log revealed the facility failed to conduct monthly fire drills during 2 of the last 12 months. Fire drills were not recorded for October and November of 2008.</p> <p>Caregiver #1 was unable to provide an explanation for the missing drills.</p> <p>Severity: 2 Scope: 3</p>	Y 434 A	<p>The facility will ensure that evacuation drills will be conducted monthly will be recorded and keep in file as required.</p> <p>B The facility will scheduled the monthly fire drill, will checked routinely as performed monthly will keep a complete record on file and have the required information at all time. The administrator or the designated person will monitor the compliance.</p> <p>C 12-6-08</p>	
Y 444	<p>449.229(9) Smoke Detectors</p> <p>NAC 449.229 9. Smoke detectors must be maintained in proper operating conditions at all times and must be tested monthly. The results of the tests pursuant to this subsection must be recorded and maintained at the facility.</p> <p>This Regulation is not met as evidenced by:</p>	Y 444 A	<p>The facility will ensure that all smoke detectors will be tested regularly every month, and keep a record in file as required.</p> <p>cont to next page</p>	

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If continuation sheet 5 of 9

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Y 444	Continued From page 5 Based on record review and interview, the facility failed to ensure smoke detectors were tested monthly in the past 12 months. Findings include: The smoke detector testing log revealed the facility smoke detectors were not tested in October and November of 2008. Caregiver #1 had no explanation for the missing smoke detector tests. Severity: 2 Scope: 3	Y 444 B	The facility will monitor the smoke detector, will be tested monthly and maintained in proper operating conditions at all time must be tested monthly, and keep the record in file. The administrator or the designated person will monitor the compliance. C 12-10-08	
Y 896	449.2744(1)(b)(2) Medication / MAR NAC 449.2744 1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include: (2) The date and time that the medication was administered. This Regulation is not met as evidenced by: Based on interview and record review, the facility failed to ensure a medication administered to 1 of 7 residents was documented on the medication administration record (#1). Findings include: Resident #1 was admitted to the facility on	Y 896 A	The facility will ensure that all residents medication administered will be documented on medication record. The record must include the date the time that medication was administered on each residents as required. B The facility will maintained a complete medication documentation record to all residents. Resident #1 medication record for Zolpidem 5mg at bedtime was documented and recorded in the medication record and in file. cont to next page	

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If continuation sheet 6 of 9

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Y 896	Continued From page 6 9/19/08. There was a bottle labeled Zolpidem 5 milligrams to be administered at bedtime. The original prescription date was 11/25/08. The November and December 2008 medication administration records lacked documented evidence Zolpidem was administered. On 12/4/08 at 4:15 PM, Caregiver #1 indicated Resident #1 had received Zolpidem since 11/25/08 and the caregiver forgot to record the medication on the medication administration record. Severity: 2 Scope: 1	Y 896	The administrator or the designated person will monitor the compliance. C 12-4-08	
Y 908	449.2746(2)(a) PRN Medication Record NAC 449.2746 2. A caregiver who administers medication to a resident as needed shall record the following information concerning the administration of the medication: (a) The reason for the administration. This Regulation is not met as evidenced by: Based on record review and interview the facility failed to ensure that documentation concerning medication administered to a resident as needed was complete for 2 of 7 residents (#3, #4). Findings include: Resident #3 was admitted to the facility on 3/19/08. Temazepam 30 milligrams at bedtime as needed for insomnia was prescribed and given	Y 908	A The facility will ensure that all documentation for medication administered to residents as needed shall record the reason for the administration of medication and the result after taking the medication as required. B The facility will always keep a record for PRN medication and the reason for administration and a complete documentation. Resident #3 Temazepam 30mg at bedtime for insomnia was documented and recorded in medication record. Record the reason and the result. Cont to next page	

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If continuation sheet 7 of 9

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Y 908	Continued From page 7 routinely during October and November of 2008. There was no reason for the medication indicated on the medication administration record. Resident #4 was admitted to the facility on 10/31/05. Benztropine 1 milligram daily as needed was prescribed and given routinely during October and November of 2008. There was no reason for the medication indicated on the medication administration record. Interview with Caregiver #1 indicated that Resident #3 routinely required Temazepam for sleep. Caregiver #1 stated that Resident #4 required Benztropin daily for tremors. Severity: 2 Scope: 2	Y 908	<i>Resident #4 Benztropine 1mg every day for muscle spasm was documented and recorded in medication record, and the reason and the result: The administrator or the designated person will monitor the compliance. C 12-5-08</i>	
Y 911	449.2746(2)(d) PRN Medication Record NAC 449.2746 2. A caregiver who administers medication to a resident as needed shall record the following information concerning the administration of the medication: (d) The results of the administration of the medication. This Regulation is not met as evidenced by: Based on record review and interview the facility failed to ensure that documentation concerning medication administered to a resident as needed was complete for 2 of 7 residents (#3, #4). Findings include:	Y 911	<i>A The facility will ensure that all PRN medication record will have the required information at all times in the record. The result and the reason for taking the medication are documented as required. B The facility will check routinely all PRN medication and will maintain a documentation record for all residents medication record and keep in file. Cont. to next page</i>	

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If continuation sheet 8 of 9

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Y 911	<p>Continued From page 8</p> <p>Resident #3 was admitted to the facility on 3/19/08. Temazepam 30 milligrams at bedtime as needed for insomnia was prescribed and given routinely in October and November 2008. There were no results of the medication administration indicated on the medication administration record.</p> <p>Resident #4 was admitted to the facility on 10/31/05. Benzotropine 1 milligrams daily as needed was prescribed and given routinely in October and November 2008. There were no results of the medication administration indicated on the medication administration record.</p> <p>Interview with Caregiver #1 did not indicate if Resident #3 was observed for the results of the Temazepam administration. Caregiver #1 indicated that Resident #4 exhibited decreased tremors with routine administration of Benzotropine.</p> <p>Severity: 2 Scope: 2</p>	Y 911	<p><i>The administrator or the designated person will monitor the compliance.</i></p> <p><i>C 12-5-08</i></p>		

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